

Please forward assigned FOIA request to your Division Director so they can determine if request should be assigned to RA for responsive records. (This includes 6RA, 6RA-D and 6RA-DA.)

FREEDOM OF INFORMATION ACT REQUEST
06-FOI-00024-12

REQUEST DATE: October 11, 2011 REQUEST RECEIVED: October 12, 2011

REQUESTOR INFORMATION:

Charles Grisham
P. O. Box 31526,
San Francisco, CA 94131

Email: curt@grish.org Work Phone#(415) 264-7400
Fax:

FEE CATEGORY: Other

*****SUBJECT*****

Requesting information regarding:
ARKWOOD, INC. (EPA ID# ARD084930148)
Site ID: 0600124
Omaha, Arkansas

*****ASSIGNED OFFICE(s)*****

6SF

DUE DATE: November 09, 2011

*****SPECIAL INSTRUCTIONS TO DIVISIONS*****

- 1. Always note Fee commitment by requester: \$ 25.
- 2. Call the requester with a fee estimate, if cost is expected to exceed amount committed \$ 25
- 3. Each Division must obtain Division Director or delegate concurrence on denial log before routing to ARA signature.
- 4. Send a copy of the response and cost information sheet to the FOIA Office (6MD-OE).

*****DO NOT WRITE IN THIS SPACE, FOR FOIA OFFICE USE ONLY*****

BILLABLE COST					
	\$4.00	\$7.00	\$10.25	Pages	Other
6SF					
TOTAL					
ADMINISTRATIVE COST					
	Postage	Free Docs.	Other		
6SF					
TOTAL					

Date of Request: Tue 10/11/2011 04:01 PM
*** Requestor Name:** Charles Grisham, Jr.
*** Company/Organization:** self
*** Mailing Address:** P.O. Box 31526
*** City:** San Francisco
*** State:** CA
*** Zip Code:** 94131
E-Mail Address: curt@grish.org
*** Phone Number:** 415-264-7400
FAX Number:

*** Request Text:**

ARKWOOD, INC. (EPA ID: ARD084930148)
Site ID: 0600124
Omaha, Arkansas
Ms. Lane, I was told by Carlos Sanchez you would provide me with an index to the documents. Until I see that, I do not know the specifics of my request. I need to access the information on November 8, 2011, in preparation for a meeting at EPA Region 6 the following day.

Estimated FEE:

- ☐ \$25
☐ \$25-\$50
☐ \$50-\$100
☒ Other

Other: full amount of costs incurred by my request

Status of Request:

New

Date Completed:

RECEIVED

OCT 12, 2011

EPA REGION VI
Freedom of Information Officer

4
6 SF
024-12
11/09/11



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 6
1445 ROSS AVENUE, SUITE 1200
DALLAS, TX 75202-2733

CERTIFICATION OF ADEQUACY OF SEARCH ON
"NO RECORD" RESPONSES

I, _____, certify that I am employed by the Environmental Protection Agency, Region 6, in Dallas, Texas (or acting as a representative) as _____, that I am familiar with the records requested and/or that I am responsible for conducting the search for responsive records for Request Identification Number 06-FOI- _____, and that I have conducted an "adequate" search for responsive records by searching the below listed location(s) (as applicable):

- 1.
- 2.
- 3.

I further certify that I am aware that a search for responsive records need not be perfect, only adequate and that adequacy is measured and/or determined by the "reasonableness" of the effort of the search in light of the specific request. Specifically, I have searched for the documents in all places that it is practical for the documents to be located. Moreover, after conducting an adequate search for records on behalf of the _____ Division/Unit, I have located no records responsive to this request or portions thereof. Further, I am attaching an itemized listing of all records which my search supports are not in the Region's possession.

Dated: _____, _____

Signature of Person Conducting Search

Dated: _____, _____

Signature of Designated Supervisor for
Person Conducting Search

Approved by OGC

STAFF CHECKLIST FOR TRANSMITTAL OF RECORDS/INFORMATION
06-FOI-_____

	YES	NO	N/A
Program has responsive records	_____	_____	_____
Searched all possible locations (hard copy/e-mail, files in workstation, file rooms, hard/flash/shared drives, CDs, blackberries etc.)	_____	_____	_____
Advised RFO/DFC of any special circumstances/sensitivity related to the FOIA Request	_____	_____	_____
Consulted with the FOIA Requester and/or RFO/DFC for further clarification of the request	_____	_____	_____
Completed "Certification of Adequate Search" form for "No Records" Response	_____	_____	_____
Completed Cost Sheet	_____	_____	_____
Provided responsive records to the assigned FOIA Specialist by due date on transmittal form	_____	_____	_____
Date: _____ Signature: _____ Ext. _____			
Printed Name: _____ Office Name: _____			

COMMENTS: _____

THIS FORM SHOULD BE COMPLETED AND RETURNED TO THE REGIONAL FOI OFFICER ALONG WITH THE RESPONSIVE RECORDS, A COST SHEET AND "NO RECORDS" CERTIFICATION FORM (IF NECESSARY), FOR EACH FOIA REQUEST PROCESSED

INTERNAL USE ONLY - DO NOT SEND THIS TO REQUESTER
Please read instructions on back before completing form.

FOIA FEE CALCULATION WORK SHEET

1. REQUEST NUMBER 06-FOI-	2. TYPE OF REQUESTER	3. DATE COMPLETED	4. ACTION OFFICE	
NOTE: The Freedom of Information Act and EPA's regulations state that the Federal Government must obtain a fee commitment from a FOIA requester before billing can occur. So if no fee commitment is plainly given in the request letter or if other Divisions also have records, please contact the requester. Provide the requester with an estimate. Make sure the requester understands what program records you refer to and make a note of his/her fee commitment.				
5. FEE COMMITMENT AMT	6. DATE OF VERBAL / WRITTEN COMMITMENT	7. FEE COMMITMENT RECEIVED FROM		
8. CLERICAL PERSONNEL		TOTAL HRS	1/4 HOUR RATE	COST
a. Search - \$ 4.00 @ 1/4 HOUR			x \$ 4.00 =	
b. Review - \$ 4.00 @ 1/4 HOUR			x \$ 4.00 =	
9. PROFESSIONAL PERSONNEL		TOTAL HRS	1/4 HOUR RATE	COST
a. Search - \$ 7.00 @ 1/4 HOUR			x \$ 7.00 =	
b. Review - \$ 7.00 @ 1/4 HOUR			x \$ 7.00 =	
10. MANAGERIAL PERSONNEL		TOTAL HRS	1/4 HOUR RATE	COST
a. Search - \$ 10.25 @ 1/4 HOUR			x \$10.25 =	
b. Review - \$ 10.25 @ 1/4 HOUR			x \$10.25 =	
11. DUPLICATION / REPRODUCTION		TOTAL	RATE or ACTUAL	COST
a. Paper or Computer Page (2 sided copy = 2 pages)			x \$.15 pg =	
b. Diskette or CD (Specify) 3 CD's			x \$ 1.00 each =	
c. Microfiche			x \$ 1.00 / sheet =	
d. Microfilm			x \$10.00/ cartridge =	
e. Video or Audio Cassette (Specify)			x \$ 5.00/ each =	
g. Maps			x	
h. Photos			x	
12. OTHER COSTS		TOTAL	RATE or ACTUAL	COST
a. Computer Cost			x =	
b. Certifications			x \$25.00 =	
c. Special Handling - Overnight Mail			x =	
d. Other (Specify)			x =	
13. ACTUAL ADMIN. COST FOR NON-BILLABLE STAFF TIME		TOTAL	1/4 HOUR RATE	COST
a. Preparer's Name: _____ Grade/Step: _____			x =	
b. Preparer's Name: _____ Grade/Step: _____				
14. FOR FOIA OFFICE USE ONLY				
a. TOTAL ADMINISTRATIVE / PROCESSING FEES _____		c. TOTAL CHARGED _____		
b. TOTAL COLLECTABLE FEES _____		d. FEES WAIVED / REDUCED YES OR NO		

INSTRUCTIONS FOR COMPLETING THE FOIA FEE CALCULATION WORK SHEET

Pursuant to the Electronic Freedom of Information Act Amendment of 1996, the Annual Report to Congress that all agencies are required to submit must include the administrative cost to implement FOIA.

The FOI Office will generate a bill for the requester but we also need your help to capture the actual administrative cost to process a FOIA request. Therefore, this worksheet is to be completed for all FOIA requests by all personnel involved in answering a FOIA request. Please complete the following information and return it to the FOIA Office along with a copy of the response letter. If you have any questions, please contact Leticia Lane at 214-665-7202 or lane.leticia@epa.gov.

1. REQUESTER NUMBER - e.g., 06-FOIA-0342-03.

2. TYPE OF REQUESTER

#1 Commercial Use Request: requester charged for search, review & duplication costs.

#2 Educational & Non-Commercial Scientific Institutions: requester charged for duplication costs excluding the first 100 pages.

#3 Representative of the news media: requester charged for duplication costs excluding the first 100 pages.

#4 All Other Requests: requester charged for search & duplication time excluding the first two hours of search time & the first 100 pages of duplication.

3. DATE COMPLETED - Enter month, day and year.

4. ACTION OFFICE - Mail code of responder.

5. FEE COMMITMENT AMT - fee commitment amount received from requester for the processing of FOIA request.

No Fee Charged for $\leq \$14.00$

Bills sent between \$14.01 - \$25.00, no payment assurance required
Written Assurance of payment from requester for amounts $> \$25.00$

6. DATE OF VERBAL / WRITTEN COMMITMENT - date when verbal or written fee commitment was given.

7. FEE COMMITMENT RECEIVED FROM - name of person from which you received verbal or written fee commitment.

8. CLERICAL PERSONNEL - enter total hours x hourly rate = cost.

a. Search - Time spent in locating the requested information.

b. Review - Time spent in reviewing the document content for releasable documents.

9. PROFESSIONAL PERSONNEL - enter total hours x hourly rate = cost.

Search/Review - see explanation above.

10. MANAGERIAL PERSONNEL - enter total hours x hourly rate = cost.

Search/Review - see explanation above.

11. DUPLICATION / REPRODUCTION - Enter Total x Rate or Actual = Cost.

12. OTHER COSTS - Enter Total x Rate or Actual = cost.

13. ACTUAL ADMIN. COST FOR NON-BILLABLE STAFF TIME
enter total x hour rate = cost

Time spent in activity other than above, such as hand carrying documents to other locations, restoring files, preparing ltr. telephone calls etc.

a. Preparer's Name is the person who prepares ltrs/telephone calls etc. Grade/Step is grade & step of preparer.

14. FOR FOIA OFFICE USE ONLY

a. Total Administrative / Processing Fees - add the actual administrative cost block in the cost column.

b. Total Collectable Fees - add the review / search blocks in the cost column.

c. Total Charged - enter the amount that the requester was charged.

d. Fees Waived / Reduced - indicate if the cost of processing the request was waived or reduced by circling yes or no.